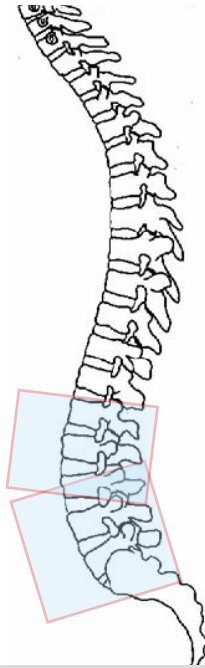
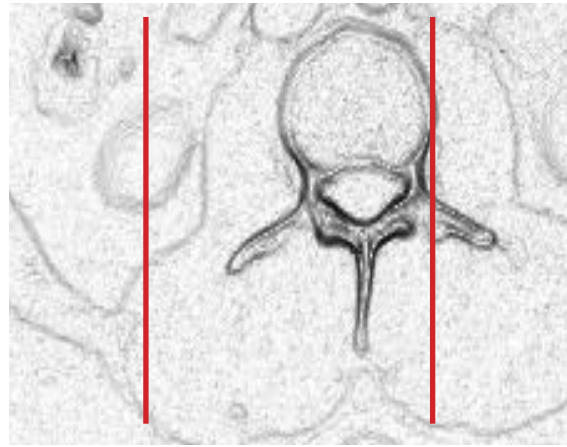


## MRI LUMBAR SPINE WITHOUT AND WITH CONTRAST



- Abnormalities should be in one stack of axials.
- Do not place the end or beginning of the stack within the abnormality!



### Special Note:

**Contact the radiologist if the patient has multi-level spine studies ordered before performing any of the studies.**

**Any patient that has had prior lumbar surgery MUST be scanned with and without contrast. Contact the radiologist if ordered without prior to scanning the patient.**

**Indications** Tumor, infection, metastasis, discitis, osteomyelitis, post-op hx of back surgery (excluding vertebroplasty).

**Localizer** scout

| Plane       | Sequence | Fat Sat | Mode | SLT / SP | FOV      | Notes  |
|-------------|----------|---------|------|----------|----------|--|
| Sagittal    | T2       |         |      | 4/1      | 28 cm    | cover from T12 through S2  |
| Sagittal    | T1       |         |      | 4/1      | 28 cm    |  |
| Sagittal    | STIR     |         |      | 4/1      | 28 cm    |  |
| Axial       | T1       | Y       |      | 4/1      | 16-18 cm | Scan Axials as two continuous blocks through l-spine (1) T12-L2/3, angle to L2 (2) L3-S1, angle to L4/5  |
| Axial       | T2       |         |      | 4/1      | 16-18 cm |  |
| Axial +C    | T1       | Y       |      | 4/1      | 16-18 cm | These may need to be scanned separately if you experience cross-talk/artifact. Do not prescribe axials in one single block without prior radiologist approval. |
| Sagittal +C | T1       | Y       |      | 4/1      | 28 cm    |  |